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23280 7590 06/10/2005

DAVIDSON, DAVIDSON & KAPPEL, LLC
 485 SEVENTH AVENUE, 14TH FLOOR
 NEW YORK, NY 10018

09/15/2005 HDESTA2 00000045 09857392

01 FC:1501 1400.00 OP
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Dulse Morel	(Depositor's name)
<i>Dulse Morel</i>	(Signature)
September 12, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/857,392	12/07/2001	David Ganderton	478.1011	4915

TITLE OF INVENTION: POWDERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	-\$700-- \$1400	\$0	-\$700-- \$1430	09/12/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
AZPURU, CARLOS A	1615		424-489000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Davidson, Davidson & Kappel, LLC

2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Vectura Limited

Wiltshire, United Kingdom

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0552 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date September 12, 2005

Typed or printed name Cary S. Kappel

Registration No. 36,561

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